PTO/SB/01 (10-01)

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Attorney Docket Number

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		First Named Invento	Lee	M. DeGross		
		COMPLETE IF KNOWN				
		Application Number	/	•		
Declaration	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date	2/22/	02		
Submitted OR		Art Unit	/ /			
with Initial Filing		Examiner Name				
As the below named inventor, I hereby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name.						
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
Pop-Up Edictionary						
(Title of the Invention)						
the specification of which						
is attached hereto						
OR SILL ANADDROOM POT International Control of the						
was filed on (MM/DD/1111)	led on (MM/DD/YYYY) as United States Application Number or PCT International					
Application Number	and was amende	d on (MM/DD/YYYY) (if applicable).				
		` '				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below						
Name Lee M. DeGross						
Address 400 Park Place, # 1H						
city Fort Lee		State NJ	ZIP 07024			
Country USA Tele	phone 201-	592-9999	Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Lee M. Family Name or Surname De G vo S S						
Inventor's Lu M. Dellace Signature			Date 2/22/02			
Residence: City Fort Lee	State NJ	Country USA	Citizenship USA			
Mailing Address 400 Park Place, # 1H						
city Fort Lee	State NJ	ZIP 87024	Country USA			
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Family Name or Surname						
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address						
City	State	ZIP	Country			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						